Lessons Learned From a Year of School Surveillance

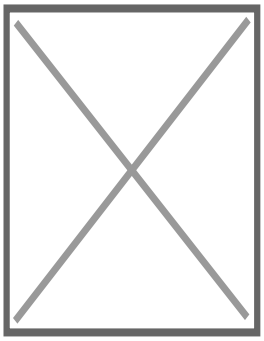
Population Health Sciences

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Editor's Note: This post is part of this year's "Back to School" series in which our experts discuss the need to support the health and well-being of youth as they return to school, while also recognizing the unique challenges presented by COVID-19. Amid this landscape, PolicyLab also recently released Guidance for In-person Education in K-12 Educational Settings, offering recommendations for how schools and families might navigate the upcoming school year. For more, follow our hashtag #PolicyLabGoesBacktoSchool on Twitter.

The word "uncertain" comes to mind when we think of the 2020-21 school year. In fall 2020, when we were both undergraduate students starting work with PolicyLab, our universities were planning to open for the semester. We met for the first time virtually right as we both had moved back to campus, hoping for the possibility of in-person instruction. However, with the consistent increase of COVID-19 cases, our universities, like so many other schools in the United States, remained closed for the semester and transitioned to virtual learning.



While adjusting to these changes in our personal lives, at our internships we were researching community transmission rates of COVID-19 by state and how they affected school reopening plans. This spring and summer, as cases decreased and many more schools—such as our own—started partial or full in-person learning, we surveilled K-12 school policies on masking, quarantine and vaccination, which illustrated the strong desire to return to a sense of normalcy for the upcoming 2021-22 school year.

While it has been rewarding to work so closely with school reopening data, research on community transmission for a global pandemic is not something we could have guessed we would have been working on this past year. However, working with this data across multiple PolicyLab teams has given us a unique perspective on school health and safety policies that can be applied to this upcoming school year.

Here, we want to share three important lessons we have learned after researching school reopening during the pandemic:

Lesson 1: Schools should be leveraged to help with vaccine accessibility.

According to the Centers for Disease Control and Prevention (CDC), about 56% of the U.S. population over the age of 12 has been fully vaccinated. In looking at these data, it seems like we have made tremendous strides since winter 2021. And we have. But while vaccines have been made available for all individuals 12 and older, they haven't yet been made fully accessible. Reducing disparities in COVID-19 exposure and vaccine access in

communities across the country is paramount to bringing us toward higher community vaccination rates, and we think schools can play a large role in this goal.

Projected vaccination rates for at least one dose of a COVID-19 vaccine as of July 4, 2021, proved to be much lower in African American (51%) and Hispanic communities (63%) in comparison to Asian (70%) and White communities (66%). African American and Hispanic communities may be hesitant to get vaccinated because they have faced decades of discrimination from the health care system, and lack of access and structural barriers may exacerbate this. A Kaiser Family Foundation survey of unvaccinated individuals found that 20% of Black and Hispanic respondents listed traveling to a vaccination site as a barrier, while only 5% of White respondents said the same. Disparities in access to the COVID-19 vaccine are also evident among immigrant and refugee groups. Immigrant and refugee families may be at increased risk of COVID-19, as they are often part of the essential workforce and lack sufficient worker protections. Because of these disparities in vaccine access and schools' trusted role within communities, **schools should be leveraged to increase vaccination rates among families and eligible children.**

In our surveillance of more than 50 school districts, we found that several schools and districts have set up their own vaccine clinics or partnered with local hospitals or businesses to offer vaccination to students and the broader community. Following this model, other schools and districts could serve as convenient and trustworthy vaccination sites for eligible students and their families. Partnering with local health care or public health officials may be helpful as well. In addition, continued school-based communications about the importance of the COVID-19 vaccine may help increase local vaccination rates. After Children's Hospital of Philadelphia organized school vaccination clinics, researchers on this project stated that schools were perceived as trustworthy suppliers of vaccinations, and they noticed that the vaccination clinics were often serving entire families, not just students.

Lesson 2: It is important to communicate with parents, staff and public health authorities about reopening policies.

In conducting our surveillance, we noticed that up-to-date reopening plans were often hard to find or absent from state and school district websites. Without accessible reopening information on school district websites, some parents and school staff members could feel anxious about returning students to in-person instruction because they might not know what precautions schools are taking or what they can do to keep their child or other students safe. The Council of Great City Schools, a coalition of urban public school systems, encourages schools to have a dedicated section on their website with detailed and regularly updated information about reopening policies. Schools should strive to make information truly accessible by offering webinars, providing Q&A opportunities, and distributing brief and easy-to-understand resources with key takeaways in multiple languages. This could make it easier for parents, staff and community members to find information about reopening quickly.

Furthermore, many districts that reopened safely last year maintained formal partnerships with local public health departments. This allowed these districts to align reopening guidance with local pandemic conditions and bring in public health authorities to conduct contact tracing and issue quarantine recommendations when clusters of cases emerged. These partnerships also allow public health departments some influence over school mitigation measures.

For the upcoming school year, the CDC's reopening guidance suggests that schools should work with local public health officials to determine appropriate prevention strategies needed in their area and to build a testing plan. Transparency and effective communication between state officials, school administrators, staff, parents, and local public health authorities remain vital to building trust and, ultimately, increasing the health and safety of the school community.

Lesson 3: There is no returning to the pre-pandemic "normal."

When the pandemic first began, we often hoped we could return to “normal.” However, after living through a year and a half of the pandemic, we realize what we’re returning to is a “new normal” that we continue to adjust to each day.

Throughout the past school year, many schools pivoted to virtual or hybrid schedules when community transmission rates were high. Outdoor spaces were used to gain a sense of normalcy when returning to school with social distancing protocols, and updated ventilation systems were installed in many buildings. These innovative ideas can still be utilized during the 2021-22 school year, as there is still a level of uncertainty about what may be required in different scenarios, including emerging COVID-19 variants and influenza this winter.

In addition, we should carry some risk aversion into future school years to avoid outbreaks of infectious illness. According to CDC data, there was only one pediatric death during the 2020-21 influenza season; in a typical influenza season about 200 youth die across the country. This monumental reduction is likely attributed to the use of masks during peak flu season and to symptomatic individuals staying at home.

PolicyLab recently shared recommendations on school safety plans for this year in their Revised Guidance for In-Person Education in K-12 Settings, highlighting the flexibility that may be needed to adjust policies based on local conditions. In this and future years, we should encourage flexible attendance policies that support staff and students to stay home when sick so that schools can avoid large outbreaks of respiratory viruses.

Hope for a “New Normal” School Year

Over the last year, schools and public health professionals have shown exceptional resilience and adapted to difficult and ever-changing circumstances. As we enter a new school year, we hope that districts are supported to leverage their unique role in communities with contributions to efforts to increase vaccine access to underserved communities, clearly communicate reopening policies with parents and staff, and that effective public health-school district partnerships continue to create responsive and timely mitigation measures. We hope that we can transition to a “new normal” that allows us to move forward from the pandemic, taking with us the lessons we have learned.

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